

Nov-23-04

10:28am

From-Moser, Patterson & Sheridan L.L.P.

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T-336 P.002/003 F-877

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Walter C. Grollitsch	(Depositor's name)
<i>Walter C. Grollitsch</i>	(Signature)
23 November 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/387,961	09/01/1999	PAUL A JAKOBSON	AVAN-0001 AVAN/000847	3219

TITLE OF INVENTION: APPARATUS AND METHOD FOR MAKING AN OPTICAL FIBER AMPLIFIER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330 1370	\$0	\$1330 1370	11/29/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUGHES, DEANDRA M	3663	359-341100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. Moser, Patterson & Sheridan, L.L.P. 2. 3.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: Avanex Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY) Fremont, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): <input type="checkbox"/> A check in the amount of the fee(s) is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>20-0782</u> (enclose an extra copy of this form).
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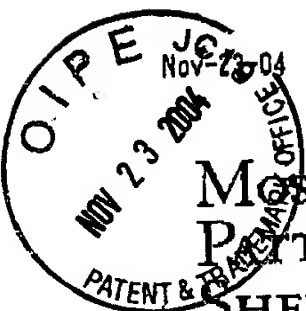
5. Change in Entity Status (from status indicated above)  
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature: *Walter C. Grollitsch* Date: 23 November 2004  
Typed or printed name: Walter C. Grollitsch Registration No.: 48678

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**DATE:** *November 23, 2004*

**FILE NO:** AVAN/000847

**TO:** Commissioner For Patents  
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**FAX NO:** 703-746-4000

**COMPANY:** USPTO

**FROM:** Walter C. Grollitsch

**PAGE(S) with cover:** 3

**ORIGINAL TO FOLLOW?** ☐ YES ☒ NO

### Issue Fee Transmittal

**U.S. SERIAL NO.:** 09/387,961

**CONFIRMATION NO.:** 3219

**CUSTOMER NO.:** 47389

**FILING DATE:** September 1, 1999

**TITLE:** Apparatus And Method For Making An Optical Fiber Amplifier

**INVENTOR:** Paul A. Jakobson

**EXAMINER:** Deandra M. Hughes

**GROUP ART UNIT:** 3663

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